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**SURFACE MINE  
INITIAL PERMIT PACKET**

Surface permits start with an “S” and then eight (8) numbers (i.e. S00301299). If the permit has been permitted before, it will have an A, B, C, D, E and so on at the end of the permit number (i.e. S00301299A). If the permit holder is a production contractor, the permit number will have a dash/letter at the end and one “0” will be dropped (i.e. S0301299-A).

STATE OF WEST VIRGINIA  
OFFICE OF MINERS' HEALTH, SAFETY AND TRAINING  
#7 Players Club Drive, Suite 2  
Charleston, WV 25311-2126

**PERMIT PRE-APPROVAL CHECK FOR DMM-60S PERMIT  
SURFACE MINES**

	DATE	COMMENTS
<input type="checkbox"/> Completed DMM-60S Application (1)Original, (2) copies		
<input type="checkbox"/> Completed General Information Form (current version)		
<input type="checkbox"/> Current Listing of Officers and Owners		
<input type="checkbox"/> Filing fee paid (\$100)		
<input type="checkbox"/> Approved Reclamation Permit from DEP (DMM-4)		
<input type="checkbox"/> Approved Operator Reassignment from DEP (DMM-19)		
<input type="checkbox"/> Approved Transfer of Permit from DEP (DMM-19A)		
<input type="checkbox"/> Division of Labor Approval (Wage Bond)		
<input type="checkbox"/> Worker's Compensation Coverage		
<input type="checkbox"/> Approved Safety Program		
<input type="checkbox"/> Pre-inspection of site by WVOMHS&T		
<input type="checkbox"/> Mine Map (Haulroads) with initial checklist & CD		
<input type="checkbox"/> Check Company against WVOMHS&T Permit Block List		
<input type="checkbox"/> Check Owners/Officers against WVOMHS&T Permit Block List		
<input type="checkbox"/> Gas Line Regulations (if applicable)		

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APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_



**STATE OF WEST VIRGINIA  
OFFICE OF MINERS' HEALTH, SAFETY AND TRAINING  
#7 Players Club Drive, Suite 2  
Charleston, WV 25311-2126**

**PERMIT PRE-APPROVAL CHECK FOR DMM-60SB PERMIT  
SURFACE MINES PRODUCTION CONTRACTOR**

	DATE	COMMENTS
<input type="checkbox"/> Completed DMM-60SB Application (1)Original, (2) copies		
<input type="checkbox"/> Completed General Information Form (current version)		
<input type="checkbox"/> Current Listing of Officers and Owners		
<input type="checkbox"/> Filing fee paid (\$100)		
<input type="checkbox"/> Approved DMM-60 for Mine Site		
<input type="checkbox"/> Approved Reclamation Permit from DEP (DMM-4)		
<input type="checkbox"/> Approved Operator Reassignment from DEP (DMM-19)		
<input type="checkbox"/> Approved Transfer of Permit from DEP (DMM-19A)		
<input type="checkbox"/> Division of Labor Approval (Wage Bond)		
<input type="checkbox"/> Worker's Compensation Coverage		
<input type="checkbox"/> Approved Safety Program		
<input type="checkbox"/> Pre-inspection of site by WVOMHS&T		
<input type="checkbox"/> Mine Map (Haulroads) with initial checklist & CD		
<input type="checkbox"/> Check Company against WVOMHS&T Permit Block List		
<input type="checkbox"/> Check Owners/Officers against WVOMHS&T Permit Block List		
<input type="checkbox"/> Gas Line Regulations (if applicable)		

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APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

**DMM 60 APPLICATION FORM  
GENERAL INFORMATION FORM  
LIST OF OWNERS & OFFICERS**

**DMM 60 APPLICATION FORM**  
**GENERAL INFORMATION FORM**  
**LIST OF OWNERS & OFFICERS**

**CHECK ONE**

- ☐ DMM-60  
☐ DMM-60S  
☐ DMM-60B (UNDERGROUND)  
☐ DMM-60SB (SURFACE)

STATE OF WEST VIRGINIA  
 OFFICE OF MINERS' HEALTH, SAFETY AND TRAINING  
 7 PLAYERS CLUB DRIVE – SUITE 2  
 CHARLESTON, WEST VIRGINIA 25311-1626

**CERTIFICATE OF APPROVAL**[MINESAFETY.WV.GOV](http://MINESAFETY.WV.GOV)

COMPANY NAME:  PERMIT NO.:   
 MAILING ADDRESS:   
 MINE NAME:  PHONE NUMBER:   
 LOCATION:  COUNTY  DISTRICT  NEAREST P.O.

**CHECK ONE:**

**SURFACE:** ☐ AUGER ☐ CONTOUR ☐ MT. TOP REMOVAL ☐ OPEN PIT ☐ HIGHWALL  
**UNDERGROUND:** ☐ SHAFT ☐ SLOPE ☐ DRIFT ☐ COMBINATION

NAME AND THICKNESS OF COAL SEAM (S):

IF PRODUCTION CONTRACTOR (DMM 60B) GIVE NAME OF PERMIT HOLDER (DMM 60)

PERMIT NUMBER:  SIGNATURE OF DMM 60 HOLDER,

**THE UNDERSIGNED OPERATOR HAS THE RIGHT TO CONDUCT MINING OPERATIONS AT THE LOCATION HEREIN DESCRIBED, UPON THE ABOVE-NAMED TRACT OF LAND AS FOLLOWS:  
 (CHECK APPROPRIATE DESIGNATION AND FILL IN APPROPRIATE BLANKS.)**

☐ BY HAVING FEE TITLE TO LAND AND COAL;

☐ BY GRANT OR LEASE OF COAL DATED: , AND RECORDED IN THE OFFICE  
 OF THE CLERK OF THE COUNTY COURT OF  COUNTY, IN BOOK   
 PAGE: .

☐ BY CONTRACT WITH:  DATED: 

SIGNATURE AND TITLE OF COMPANY OFFICIAL

STATE OF WEST VIRGINIA - COUNTY OF:  TAKEN SUBSCRIBED AND SWORN TO ME BEFORE ME THIS  DAY OF  
, DATED: .

MY COMMISSION EXPIRES:  

(NOTARY PUBLIC)

**NOTE:** APPROVAL CONTINGENT UPON COMPLIANCE WITH STATUTORY REQUIREMENTS SET FORTH IN STATE CODE CHAPTER 21, ARTICLE 5, SECTION 14-TITLED "EMPLOYERS BOND FOR WAGES AND BENEFITS."

DISTRICT INSPECTOR DIRECTOR OR AUTHORIZED REPRESENTATIVE DATE OF APPROVAL

**WVMHS&T OFFICE USE ONLY**

COMPREHENSIVE MINE SAFETY PROGRAM  DOL COMPLIANCE  LOOKBLOCK  GI FORM

SITE INSPECTION  \$100.00 NON-REFUNDABLE, NON-TRANSFERABLE PERMIT FEE

**PERMITS ARE VALID FOR ONE CALENDAR YEAR (JANUARY THROUGH DECEMBER) AND MUST BE RENEWED EACH JANUARY. SEE REVERSE SIDE FOR APPLICABLE CODE SECTIONS.** Operators are required to comply with all WV laws and regulations. Copies can be purchased or downloaded from the publication link on our website at [minesafety.wv.gov](http://minesafety.wv.gov)

REVISED 03-2019

**22A-3-35****Applicability and enforcement of laws safeguarding life and property; regulations authority of Office of Miner's Health, Safety and Training regarding enforcing safety laws.**

All provisions of the mining laws of this state intended to safeguard life and property shall extend to all surface mining operations insofar as such laws are applicable thereto. The Director shall promulgate reasonable regulations in accordance with the provisions of chapter twenty-nine-a of this code to protect the safety of those employed in and around surface mines. The enforcement of all laws and regulations relating to the safety of those employed in and around surface mines is hereby vested in the Office of Miner's Health, Safety and Training and shall be enforced according to the provisions of chapter twenty-two-a of this code.

**22A-2-63****No mine to be opened or reopened without prior approval of the director of the office of miners' health, safety and training; certificate of approval; approval fees; extension of certification of approval; certificates of approval not transferable; section to be printed on certificates.**

(a) After the first day of July one thousand nine hundred seventy-one, no mine shall be opened or reopened unless prior approval has been obtained from the director of the Office of Miners' Health, Safety and Training, which approval shall not be unreasonably withheld. The operator shall pay for such approval a fee of one hundred dollars, which payment shall be tendered with the application for such approval: Provided, that mines producing coal solely for the operator's use shall be issued a permit without charge if coal production will be less than fifty tons a year.

Within thirty days after the first day of January of each year, the holder of such permit to open a mine shall apply for the extension of such permit for an additional year. Such permit, evidenced by a document issued by the director, shall be granted as a matter of right for a fee of one hundred dollars if, at the time such application is made, the permit holder is in compliance with the provisions section seventy-seven of this article and has paid or otherwise appealed all coal mine assessments issued to the mine if operated by the permit holder and imposed under article one-a, chapter twenty-two-a of this code. Applications for extension of such permits not submitted within the time required shall be processed as an application to open or reopen a mine and shall be accompanied by a fee of one hundred dollars.

(b) Permits issued pursuant to this section shall not be transferable.

(c) If the operator of a mine is not the permit holder as defined in subsection (a) above, then such operator must apply for and obtain a certificate of approval to operate the mine on which the permit is held prior to commencing operations. An operator who is not the permit holder operating such mine on the effective date of this section must apply for a certificate of approval on or before the first day of July one thousand nine hundred ninety-three. The operator shall pay a fee of one hundred dollars, which payment shall be tendered with the application for approval. Such approval, evidenced by a certificate issued by the director, shall be granted if, at the time such application is made, the applicant is in compliance with the provisions of section seventy-seven of this article and has paid or otherwise appealed all coal mine assessments imposed on such applicant for the certificate of approval under article one-a, chapter twenty-two-a of this code.

(d) In addition to the authority to file a petition for enforcement under subdivision (4), subsection (a), section nineteen, article one-a, chapter twenty-two-a of this code, if an operator holding a certificate of approval issued pursuant to subsection (c) of this section, against whom a civil penalty is assessed in accordance with section nineteen, article one-a, chapter twenty-two-a of this code, and implementing regulations, and which had become final, fails to pay the penalty within the time prescribed in such order, the director or the authorized representative of the director, by certified mail, return receipt requested, shall send a notice of such operator advising the operator of the unpaid penalty. If the penalty is not paid in full within sixty days from the issuance of the notice of delinquency by the director, then the director may revoke such operator's certificate of approval; Provided, that such operator to whom the delinquency notice is issued shall have thirty days from the receipt thereof to request, by certified mail, return receipt requested, a public hearing held in accordance with the procedures of section fifteen, article one-a, chapter twenty-two-a of this code, and implementing regulations, including application for temporary relief. Once such operator's certificate of approval is revoked pursuant to this subsection, such operator shall be prohibited from obtaining any certificate of approval under the provisions of this section to operate any other mine until such time as that operator pays the delinquent penalties that have become final.

(e) Every firm, corporation, partnership or individual that contracts to perform services or construction at a coal mine shall be deemed to be an operator and beginning the first day of January, one thousand nine hundred ninety-five, must apply for and obtain a certificate of approval prior to commencing operations: Provided, that such persons shall only be required to obtain one certificate annually: Provided, however, that persons such as, but not limited to, consultants, mine vendors, office equipment suppliers, and maintenance and delivery personnel are excluded from this requirement. Any such operator shall pay a fee of one hundred dollars, which shall be tendered with the application for approval. Such approval, evidenced by a certificate issued by the director, shall be granted if, at the time such application is made, applicant has paid or otherwise appealed all coal mine assessments imposed on such applicant under article one-a, chapter twenty-two-a, of this code.

Within thirty days after the first day of January of each year, the holder of such certification of approval shall apply for the extension of such approval for an additional year. Applications for extension must be accompanied by a fee of one hundred dollars. An extension shall be granted if, at the time such application is made, the applicant has paid or otherwise appealed all coal mine assessments imposed on such applicant under article one-a, chapter twenty-two-a of this code. All delinquent assessments which have been imposed upon a certificate of approval holder or applicants under this section shall not be imposed upon any permit holder or certificate of approval holder or applicants under this section shall not be imposed upon any permit holder or certificate of approval holder or any applicant pursuant to subsection (a) or (c) of section sixty-three.

(f) The provisions of this section shall be printed on the reverse side of every permit issued under subsection (a) and certificate of approval issued under subsection (b) herein.

(g) The district mine inspector shall be contacted for a pre-inspection of the area proposed for underground mining prior to the issuance of any new opening approval.

# West Virginia Office of Miners' Health Safety & Training

## GENERAL INFORMATION FORM

Region: \_\_\_\_\_

Select Type of Operation (select only one)

☐ UNDERGROUND COAL MINE

☐ SURFACE COAL MINE

☐ COAL HANDLING FACILITY

☐ QUARRY

**All Applicants must complete the following section**

WV Permit No.:	MSHA ID No.:	FEIN No.:
Company Name:	Mine/Facility Name:	
Mailing Address:		
City:	State:	Zip:
County(s):	Location:	
Latitude:	Longitude:	Quadrangle:
No. of Shifts:	Working Status:	
Company Phone:	Mine/Facility Phone:	
Name of Company Contact:	Title:	
Superintendent:	Foreman:	
Certified Person Responsible for Training:		
Miners' Representative (if applicable):		
WV Workdners Comp Policy No.:	Effective Date:	Co. Registered with WV Sec. of State: Y <input type="checkbox"/> N <input type="checkbox"/>

**Assessment Contact Officer and Assessment Mailing Address: (assessments will be mailed to this address unless otherwise notified)**

Name:	Title:	Phone:
Address:	City:	St: Zip :
Email Address:		

**Underground and Surface Coal Mine Applicants must complete the following section**

Name of Reclamation Permit Holder:	DMM60B: Y <input type="checkbox"/> N <input type="checkbox"/>
If Production Contractor (DMM60-B) Provide Name of Company and Permit Number:	
Responsible for Reporting Tonnage: Y <input type="checkbox"/> N <input type="checkbox"/>	
Seam(s) Being Mined:	Thickness:

**Underground Coal Mine Applicants must complete the following section (check mine type)**

Mine Type:	Shaft: <input type="checkbox"/>	Slope: <input type="checkbox"/>	Drift or Combination: <input type="checkbox"/>	No. of Sections:
Mining Direction (advance <input type="checkbox"/> or retreat <input type="checkbox"/>		Roofbolt - Type and Size:		Inside Haulage Type:
Mine Rescue Services provided by (required by 22-1A-33):				

**Surface Coal Mine Applicants must complete the following section (check operation type)**

Operation Type:	Contour: <input type="checkbox"/>	Open Pit: <input type="checkbox"/>	Mt.Top Removal: <input type="checkbox"/>	Auger: <input type="checkbox"/>	Highwall: <input type="checkbox"/>	Other: <input type="checkbox"/>
No. of Acres:	Does this Operation Use High Voltage Electrical Equipment Y <input type="checkbox"/> N <input type="checkbox"/>					

**Coal Handling Facility Applicants must complete the following section (check facility type)**

Facility Type: Loadout: <input type="checkbox"/>	Tipple: <input type="checkbox"/>	Prep Plant: <input type="checkbox"/>	Cleaning Plant: <input type="checkbox"/>	River Dock: <input type="checkbox"/>	Other: <input type="checkbox"/>
Type of Haulage into facility:			Type of Haulage out of Facility:		
No. of Employees:	Operating Days:		Empl. Hrs. Worked Per Month:		

**Quarry Applicants must complete the following section**

Mineral(s) Produced:	Geological Formation:
No. of Sections:	

**Email Address Information: (Use additional sheet if necessary to include all emails for person you want listed)**

Email Address of Company Representative:
Email Address of Safety Department Contact:
We are asking for this information so that we can send electronic mailings, safety notices, regulations, etc.

\_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
**Signature (must be an owner, partner, LLC member or corporate officer)**

**PERMIT APPLICATION  
OWNERS - OFFICERS**

WV PERMIT NO: \_\_\_\_\_

In accordance with the Federal Privacy Act, 5 USC 552a, and 1974 addendum Public Law 93-579 7(b), please provide the names, titles and social security numbers of every officer, partner, resident agent, director, or person performing a function similar to a director, together with the names and titles of any person owning of record ten percent (10%) or more of any class of voting stock of the applicant: (use attachments as necessary). **PLEASE NOTE: WE NOW ASK FOR THE LAST FOUR (4) DIGITS OF SOCIAL SECURITY NUMBERS. THIS INFORMATION IS REQUIRED FOR IDENTIFICATION PURPOSES FOR OUR PERMIT ISSUANCE SYSTEM. THIS INFORMATION IS REQUIRED.**

**AGENT:**

Name:	Last four digits of SSN: xxx-xx-	
Address		
City:	State:	Zip:

Telephone No.:	Email Address:
----------------	----------------

***OWNERS / OFFICERS***

	First Name	MI	Last Name	Last four digits of SSN	Title	Start/End Date
1.				xxx-xx-		
2.				xxx-xx-		
3.				xxx-xx-		
4.				xxx-xx-		
5.				xxx-xx-		
6.				xxx-xx-		
7.				xxx-xx-		
8.				xxx-xx-		
9.				xxx-xx-		
10.				xxx-xx-		

(If additional owners/officers are to be listed, use additional sheet(s)).

***Do Not Write Below This Line***

***Miners' Health, Safety and Training use only:***

Company ID \_\_\_\_\_ File Update \_\_\_\_\_ Incomplete \_\_\_\_\_

REGIONAL OFFICE ADDRESSES

**REGION I**  
WV MHST  
14 COMMERCE DRIVE, SUITE 1  
WESTOVER, WV 26501  
(304) 285-32686

**REGION II**  
WV MHST  
830 VIRGINIA AVENUE  
WELCH, WV 24801  
(304) 436-8421

**REGION III**  
WV MHST  
431 Running Right Way  
Julian, WV 25529  
(304) 369-7823

**REGION IV**  
WV MHST  
337 INDUSTRIAL DRIVE  
OAK HILL, WV 25901  
(304) 469-8100

## FILING FEE PER PERMIT



**FILING FEE PER PERMIT IS \$100.00**

*This can be paid by a check or on our  
website at [minesafety.wv.gov](http://minesafety.wv.gov)*

MR-4, MR-19, OR MR-19A  
LABOR COMPLIANCE  
COMPENSATION COMPLIANCE

**MR-19 FROM DEP  
LABOR COMPLIANCE FORM  
COMPENSATION COMPLIANCE**

MR-2

STATE OF WEST VIRGINIA

NEW PERMIT

Department of Environmental Protection

PERMIT NUMBER

[REDACTED]

Issue Date

[REDACTED]

NPDES NUMBER

[REDACTED]

Expiration Date

[REDACTED]



# PERMIT

## TO ENGAGE IN SURFACE MINING

Issued To:

[REDACTED]

County

[REDACTED]

Nearest  
Post Office

[REDACTED]

Limited To

[REDACTED]

Acres

Pursuant to Article 3, Chapter 22 of the Code of West Virginia, a PERMIT is hereby granted to the above named permittee to engage in surface mining in the state of West Virginia. As a condition of this permit, all surface coal mining and reclamation operations shall be conducted as described in and in compliance with the complete application and only on those lands specifically designated on the map(s) submitted. All operations shall be conducted to prevent significant imminent environmental harm to the health or safety of the public. The permittee shall, as soon as possible after learning of such condition or of noncompliance with any term or condition of the permit, warn any person whose health and safety is in imminent danger and the permittee shall immediately commence implementation of measures necessary to comply and shall also accelerate or provide the additional monitoring necessary to determine the nature and extent of such noncompliance.

The following are special terms and conditions of this permit: 1) The permittee shall notify the inspector five (5) days prior to beginning of operations unless operations begin within five (5) days of permit issuance; 2) The permittee shall obtain a NPDES (402)\* Permit prior to initiation of mining activities; the NPDES Permit must be maintained through final release of this permit; 3) No instream work or filling activities can commence in waters of the U. S. until 404\* Authorization is granted by the U.S. Army Corps of Engineers and its associated State (401)\* Water Quality Certification is made; 4) MSHA approval must be obtained prior to initiation of any construction activities.

(\*note: 401, 402 and 404 refer to applicable Sections of the Clean Water Act)

*A copy of this PERMIT and the complete approved application upon which it is based shall be kept at the site of operations at all times.*

SECRETARY, Department of Environmental Protection

DATE

[REDACTED]

[REDACTED]

[REDACTED]

By: Director, Division of Mining and Reclamation



west virginia department of environmental protection

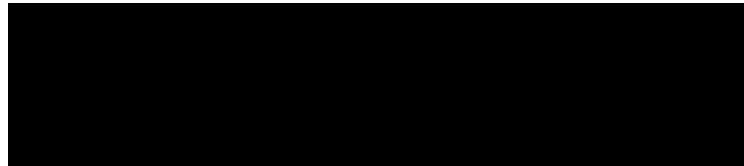
Division of Mining and Reclamation  
1159 Nick Rahall Greenway  
Fayetteville, WV 25840  
(304) 574-4465

Austin Caperton, Cabinet Secretary  
dep.wv.gov

**NOTICE OF ADVANCE APPROVAL  
OF PERMIT TRANSFER**

TRANSFERRED FROM (Permittee)	TRANSFERRED TO (Applicant)
[REDACTED]	[REDACTED]

**RE: Permit No. (s):**



Dear Applicant:

Your application for transfer of the above referenced permit(s) has been reviewed in our regional office and determined to be in compliance with the requirements of the Surface Mining Reclamation Regulations. In accordance with 3.25(a)(4) of these regulations, the Director may grant approval in advance of the close of the public comment period.

Therefore, this is hereby giving you notice that we are honoring your request for advance approval. This advance approval is based upon the following stipulations:

1. That where information is made available to the Director as a result of public comment that would preclude approval, such approval shall be immediately withdrawn.
2. The current permittee referenced above remains responsible for all enforcement activities related to this permit until final approval of the permit transfer.
3. This advance approval is limited to a period of 60 days from advance approval date.
4. The bond of the current permittee remains in effect until final approval of permit transfer.

Sincerely,

DEP Authorized Representative

cc: OMR Headquarters  
Environmental Inspector  
Permittee

Promoting a healthy environment.

<b>TO:</b>	<b>FROM:</b>
<b>WV Division of Labor</b> <b>Wage and Hour Section</b> <b>Building 6, Room B-749</b> <b>Capitol Complex</b> <b>Charleston, WV 25305-0570</b>	
	<i>Telephone No.:</i>

***Type of Application:***☐ MR-4☐ MR-19\*☐ MR-19A\*☐ MR-19B\*

<b>SMA/PERMIT NO.</b>	<b>MSHA ID NO.</b>	<b><i>DOL ONLY:</i></b> <b>NO. EMPLOYEES</b>
-----------------------	--------------------	---

<b>Applicant:</b> _____			
<b>*Permittee:</b> _____			
<b>Mailing Address:</b> _____			
<b>Street Address:</b> _____			
<b>City:</b> _____	<b>State:</b> _____	<b>Zip:</b> _____	<b>Telephone No.</b> _____
<b>County:</b> _____		<b>Nearest Post Office:</b> _____	
<b>Latitude</b> _____ ° ' "	<b>Longitude</b> _____ ° ' "		
<b><i>Company Officers:</i></b>			
<b>NAME</b>		<b>TITLE</b>	

<b><i>Division of Labor Response:</i></b> <small>(return response to DEP at the above address)</small>	
In accordance with the West Virginia Code, we have reviewed our files and find this applicant to be:	
<input type="checkbox"/> <b>IN COMPLIANCE</b>	
<input type="checkbox"/> <b>Operated +5 Years</b>	
<input type="checkbox"/> <b>Sufficient Wage Bond</b>	
<input type="checkbox"/> <b>No Employees</b>	
<input type="checkbox"/> <b>NOT IN COMPLIANCE</b>	
<b>DATE</b>	<b>DOL AUTHORIZED REPRESENTATIVE</b>

# Verification of Workers Compensation

Go to the NCCI Website to print verification

The screenshot shows the NCCI website's 'Proof of Coverage Inquiry' page. At the top, there is a search bar with the placeholder text 'Search ncci.com' and a magnifying glass icon. Below the search bar, there are links for 'Contact Us', 'Log Out', and 'My Profile'. The main navigation bar includes 'Search', 'Reports', 'Carrier Information', and 'About'. The 'Search' tab is active, and a 'Show me how' link is visible. The search form is titled 'West Virginia' and has tabs for 'Employer', 'FEIN', 'Address', 'Primary Insured', and 'Policy Number'. The 'Employer' tab is selected. The form contains the following fields: 'Employer Name \*' (required), 'Coverage Date' (with a calendar icon), 'City', and 'Zip Code'. There are radio buttons for 'Contains' (selected) and 'Starts With'. At the bottom of the form are 'Search' and 'Clear Search' buttons.

Search ncci.com

Contact Us Log Out My Profile

Search Reports Carrier Information About

Search Show me how West Virginia

Employer FEIN Address Primary Insured Policy Number

Employer Name \*

Contains Starts With

Coverage Date City Zip Code

Search Clear Search

# INITIAL CMSP SUBMITTAL FORM

Initial CMSP



**INITIAL CMSP SUBMITTAL FORM**  
**GENERAL CMSP**



## West Virginia Office of Miners' Health Safety & Training

### UNDERGROUND AND SURFACE MINE COMPREHENSIVE MINE SAFETY PROGRAM INITIAL PROGRAM SUBMITTAL FORM

Company Name \_\_\_\_\_

WV Permit No. \_\_\_\_\_

Mine Name \_\_\_\_\_ MSHA ID: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

No. of Employees \_\_\_\_\_ No. of Shifts \_\_\_\_\_ No. of Sections \_\_\_\_\_

FEIN Number: \_\_\_\_\_

Please give the name and address for a safety contact person at the mine:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Street/Route: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date program was submitted: \_\_\_\_\_

---

**PLEASE INCLUDE A WRITTEN COPY OF YOUR PROGRAM WITH THIS FORM.**

#### **PART A - NOTIFICATION OF EMPLOYEES**

Which option did the operator elect to use for employee review of the safety program?

Please check the appropriate option:

- ☐ Miners' representative (Please go directly to Subpart 1)
- ☐ Meeting with employees (Please go directly to Subpart 2)
- ☐ Exempt Owner/Operator (*Applies only to Independent Truckers*)

**SUBPART 1 Miners' Representatives:**

Please provide names of miners' representatives (at least three are required)  
(Print Names)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Are all employees provided with a copy of the safety program? Yes ☐ No ☐

**Date copy provided to employees:** \_\_\_\_\_

Has a description of the eight hour miners' representative instruction program been attached?  
Yes ☐ No ☐

Did miners' representatives participate in developing the program? Yes ☐ No ☐

**\*\*PLEASE GO ON TO PART B if you completed Subpart 1.**

**Subpart 2 - Meeting with Employees**

When was the meeting with employees held?

**Date of Meeting:** \_\_\_\_\_

When was the notice of the meeting posted on the mine bulletin board?

**Date Notice of Meeting Posted:** \_\_\_\_\_

When was the Director of the Office of Miners' Health, Safety & Training notified of the time and place of the meeting? (at least ten (10) days prior to meeting)

**Date Notified:** \_\_\_\_\_

**\*\*PLEASE GO ON TO PART B if you completed Subpart 2**

**PART B - POSTING AND MINE EVALUATION:**  
**WRITTEN COMMENTS ON THE PROGRAM**

When was the safety program posted on the mine bulletin board?

**Date Posted:** \_\_\_\_\_

Was a mine safety evaluation conducted prior to submission of the safety program?  
Yes ☐ No ☐

Has the operator received written comments regarding the safety program?  
Yes ☐ No ☐

If yes, have the written comments been included with this submission?  
Yes ☐ No ☐

**\*\*PLEASE GO ON TO PART C**

## **PART C - SAFETY PROGRAM COMPONENTS AND PROGRAM EVALUATION**

Based upon the safety needs of the operator's particular mine, the written comprehensive safety program includes the following components:

**(Check Appropriate Response)**

- |     |   |                              |                             |
|-----|---|------------------------------|-----------------------------|
| 1.  | The operator's safety policy for each mine?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2.  | The operator's policies regarding personal safety protection of each worker (hard hats, shoes, etc.)?               | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3.  | Classroom training programs and objectives?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4.  | Workplace training programs and objectives?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5.  | Training programs and objectives for safety meetings?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6.  | Informal training programs and objectives?  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7.  | The operator's practices and procedures for promoting safe working practices for personnel?                         | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8.  | The operator's practices and procedures for promoting safe working conditions in the mine environment?              | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9.  | The operator's practices and procedures for promoting safe working practices for machinery, equipment, and systems? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 10. | The operator's emergency provisions and procedures at the mine?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 11. | Operator's procedures for accident investigation?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 12. | Operator's procedures for filing accident reports?  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 13. | Operator's procedures for analysis of accidents?  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 14. | Operator's procedures for accident investigation follow-up?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 15. | Operator's practices and procedures for comprehensive mine safety program promotion and enforcement?                | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Other components deemed necessary by the operator to effectuate the goals of Chapter 22A, Article 1, Section 36 of the W.Va. Code:


### **ANNUAL EVALUATION CRITERIA**

Please check the box next to the items you plan to use in the annual evaluation of the effectiveness of your program:

#### **Required Information**

- ☐ Accident frequencies or rates
- ☐ Accident distributions
- ☐ Violations written under W.Va. Code Chapter 22A, Article 1, Section 15a
- ☐ Fatal Accidents and serious injuries as defined by Title 36, Series 19, Section 3.2

#### **Optional Sources of Information**

- ☐ Mine conditions or changes in mine conditions
- ☐ Mine methods or equipment at the mine
- ☐ Number of working sections at the mine
- ☐ Personnel or management at the mine
- ☐ Instructors responsible for safety training
- ☐ Findings from safety observations conducted by mine officials

#### **Other optional items**

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**\*\*PLEASE GO ON TO PART D**

**PART D - SAFETY INSTRUCTORS**

Please list below all instructors who, at this date, have primary responsibility for planning and/or conducting safety training at the mine. Please list all qualifications/certifications relevant to the safety training responsibilities involved:

**Company Employees:**

	<u>Instructor Name</u>	<u>Qualifications/Certifications</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

**Private Agency or Public Organization Personnel:**

	<u>Instructor Name</u>	<u>Qualifications/Certifications</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

**\*\*PLEASE GO ON TO PART E**

**PART E- PROGRAM CHECKLIST**

Does your safety program include:

The methods or procedures used to accommodate employee review of the program; Yes ☐ No ☐

The methods or procedures used to develop an initial mine evaluation; Yes ☐ No ☐

Methods or procedures used to carry out each component which the operator identified in his safety program; Yes ☐ No ☐

Methods or procedures used in the annual review and evaluation of the operator's safety program; Yes ☐ No ☐

You will be notified of the program approval within 30 days after the safety program submittal deadline. Should your submission not be approved, you will be notified of the specific reasons for rejection of the program and provided a reasonable length of time to modify and resubmit your program to the Office of Miners' Health, Safety & Training.

\_\_\_\_\_  
**Signature of person filing**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Title of person filing**

\_\_\_\_\_  
**Telephone Number**

**List all independent contracting companies at this mine site as defined in Title 36, Series 20, Section 6, attach additional page(s) if necessary.**

<b>Contractor Company Name</b>	<b>Address</b>	<b>Type of Contracting Service</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Send this initial submittal form (along with any additional attachments) to the attention of the Safety Instructor located at your nearest WV Office of MHST Regional Office.**

**REGION 1**

WV OFFICE OF MHST  
14 COMMERCE DRIVE – SUITE 1  
WESTOVER, WV 26501  
304-285-3268  
304-285-3275 (fax)

**REGION 3**

WV OFFICE OF MHST  
431 RUNNING RIGHT WAY  
JULIAN, WV 25529  
304-369-7823  
304-369-7826 (fax)

**REGION 2**

WV OFFICE OF MHST  
891 STEWART STREET  
WELCH, WV 24801  
304-436-8421  
304-436-2100 (fax)

**REGION 4**

WV OFFICE OF MHST  
337 INDUSTRIAL DRIVE  
OAK HILL, WV 25901  
304-469-8100  
304-469-4059 (fax)



CMSP  
COMPANIES PROVIDING CONTRACT  
LABOR AT SURFACE MINES

# **COMPREHENSIVE MINE SAFETY PROGRAM**

## **COMPANIES PROVIDING CONTRACT LABOR AT SURFACE MINES**

WV Permit Number \_\_\_\_\_ MSHA ID No. \_\_\_\_\_

Company Name \_\_\_\_\_

Mine Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

\_\_\_\_\_  
Signature of Company Official ONLY

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

# **SURFACE COMPREHENSIVE MINE SAFETY PROGRAM**

## **INTRODUCTORY STATEMENT**

The intent of this, as with any safety program, is to create and maintain a “safe as possible” work environment for the miner. This particular safety program will deal primarily with surface mines and surface facility workers and the conditions and practices that they exercise. In developing this program, evaluations of the operations’ past history, citations, accident reports, foreman reports, etc., were formulated largely from this information.

With the implementation of this program, management hopes to not only reduce the number of fatalities as well as lost time accidents, but to reduce and prevent conditions from developing that lead to accidents. Through the involvement of all employees and planned promotional incentives, management hopes to demonstrate a sincere commitment towards the health and safety of each worker at this operation. However, the operator understands that regardless of the scope of this program and the enforcement of its’ provisions, all accidents cannot be avoided or prevented, but the operator also understands and believes that through this program and intense training programs, the rate of and probability of accidents can be greatly reduced.

## **COMPONENT 1: COMPANY SAFETY POLICY**

The operator wishes to express a sincere commitment towards the health and safety of all employees. The operator will comply with all State and Federal regulations. Through this strict compliance with State and Federal regulations, and an approved Comprehensive Mine Safety Program, the operator shall strive to enhance the work environment in which the employee must perform their work duties. The safety program in itself shall stand as a true commitment of the responsibility that the operator has assumed to help insure a safer work environment. Through the comprehensive safety training program, each employee will be made aware of their own responsibility that they must take towards everyone’s safety. Even with today’s hard economical times, the operator feels that safety with production is not only an honorable goal, but one that can be obtained.

### **C-1: Equipment Operation Safety Rules**

**DOZER OPERATOR:** When parking equipment, make sure that the blade is lowered to the ground and the ripper if such dozer is equipped with one, is secure. Never operate a dozer that has not been pre-shifted prior to operation. When getting off of the dozer, use handrails and steps; never jump from equipment unless an emergency situation has arisen.

**LOADER OPERATOR:** Do not tram loader with the bucket raised to, or above eye level. Do not approach rock or coal truck when the truck operator is on or immediately around the truck. When parking loader, always set the park brake, lower the bucket to the ground, and utilize ladders and hand-rails to dismount.

**TRUCK OPERATOR (rock, coal & service):** While being loaded, keep body limbs inside truck. If necessary to get out of truck, stay clear of the truck and loader until equipment is loaded. When dismounting truck, set park brake, wheel chocks, and utilize ladders and steps. Always obey posted traffic signs while either on the job or on the highway.

**DRILL OPERATOR:** Be alert to changes in weather; lightning is a constant danger to drilling and blasting crews. Do not tram drill with mast in up position. Make sure all dust suppression systems are in place and functioning properly. Mount and dismount by using the ladders and steps provided.

**GRADER and BACKHOE OPERATOR:** Always keep in communication with haul road traffic so each equipment operator on the haul road knows and is aware of your activities. Mount and dismount equipment utilizing ladders and steps which are present.

**MECHANICAL and SERVICE CREWS:** Make sure all equipment to be repaired is located in a good safe area whenever possible. If work requires being under the equipment, make sure that equipment is blocked and secured. Make sure all acetylene and oxygen tanks are secured before transporting and/or usage takes place. Keep service trucks and equipment free of excessive oil and grease and other hazardous materials.

### **C-1: Company Safety Rules and Regulations**

1. Don't take chances; follow instructions. If you don't know, ask.
2. Immediately report any condition or practice that could cause injury or damage to either personnel or equipment.
3. Keep your workplace free of hazardous clutter. Practice good housekeeping.
4. Safely use tools and equipment you work with.
5. If you or the equipment you are using are involved in an accident, report it immediately.
6. Use, adjust, alter, repair equipment only when authorized to do so.
7. Wear appropriate personal protective equipment as directed. Keep it in good working order and condition.
8. No horseplay; don't distract others.
9. Obey all rules, signs, and instructions as well as laws.
10. Read the mine bulletin board.
11. Hard hat, steel toes, and safety glasses are required at all times on company property.
12. Hearing protection is required where exposure exceeds compliance limits.
13. No alcoholic beverages will be allowed on company property.
14. Machinery operators shall pre-shift their equipment before placing it into service.
15. Operate all machinery in a safe manner.
16. No employee shall tamper with a piece of fire fighting equipment unless needed.
17. Always face the direction of travel while operating machinery.
18. No employee is to remove articles of first aid kits unless needed. When used, please report what was used so it can be replaced.
19. Do not transport compressed gas tanks without the protective cap and the tanks secured.
20. Do not store oil or other combustibles around electrical installations.

21. All training classes are mandatory for all employees.
22. Abuse or intentional mistreatment of equipment or systems will result in dismissal.

## **COMPONENT 2: PERSONAL PROTECTIVE GEAR**

As stated in the *Operator's Safety Policy*, protective gear will be required for certain tasks and recommended for others. Upon assignment of a task that would require selective protective equipment, it will be issued upon assignment. Safety equipment that is for recommended usage, but not required, will be issued upon request of the miner. The operator, through the supervisory staff, will promote the use of such recommended and required equipment by incorporating their usage into formal and informal safety contacts.

When a miner is issued a piece of protective equipment, complete instructions will be given and gone over before the miner commences the work assignment. This instruction will be conducted by a member of the supervisory staff who will be competent and knowledgeable in the usage and maintenance of said gear.

## **COMPONENT 3: SAFETY TRAINING**

### **C-3: Classroom Training**

Safety training classes at this operation will be conducted by an approved MSHA certified instructor. Newly Employed Experienced Miner Training, Annual Refresher Training, and Newly Employed Inexperienced Miner Training shall utilize the certified instructor. Supervisory staff shall administer New Task Training to employees, and Hazard Training to visitors to the mine site.

These sessions shall be conducted in an informal but instructional manner, with input from the miners on current conditions of the mine and general work area, and safe practices. All classroom training will be conducted along the guidelines covering the required material as outlined in Part 48 CFR relating to coal mine health and safety.

Whenever available, new and up-to-date teaching aides will be utilized, such as films, booklets, flyers, etc., to help convey safety to any special or specific problems of the mine. It is in this area where the skills and past experiences of any of the employees will be called upon for the benefit of others.

### **C-3: Workplace Training**

Workplace training at this operation will be conducted on the job site by either the mine foreman or an experienced equipment operator. This training will be primarily New Task training but is not limited to this type only. Besides the formal training mentioned above, short 5 – 10-minute informal safety meetings with individual miners or crews will be conducted by members of the supervisory staff. However, the immediate foreman will bear the main responsibility for those miners involved in these safety meetings.

The content of these safety meetings will center around current conditions at the operation, as well as safety policies and procedures to be followed to insure proper methods for job performance and efficiency, with emphasis on job-related safety.

### **C-3: Safety Meetings**

General safety meetings shall be scheduled for pre-shift at least once weekly and shall be conducted by the foreman unless conditions warrant; in which case, safety meetings may be conducted on a daily basis. Attendance at these meetings will be mandatory, and subject matter will be determined by current conditions and procedures.

### **C-3: Specialized Training**

At this time, no specialized training is being provided by the operator, except training relating to operations and general care of equipment. However, the management has, and will continue to encourage its' personnel to participate and enroll in specialized miner education classes sponsored by various state and federal agencies working in conjunction with the mining industry.

## **COMPONENT 4: SAFE WORK PRACTICES AND CONDITIONS**

Presently, the operator does not offer specific training related to individual occupations. However, when a miner obtains a new job classification, or through a new task assignment, they receive specific training along the Federal guidelines of Task Training and Hazard Training to insure the safe operation of a piece of machinery or job that they are required to perform.

The mine foreman will be responsible for the direct supervision of inexperienced miners through safety meetings, demonstrations, observation, etc. until the miner is believed to be competent enough to perform their job in a safe manner.

Safety observations will be conducted by the supervisory staff on a regular basis. The observations will be recorded, and analysis used in the evaluation and updating of the operations' safety program. Those miners with a proven unsafe work record will be observed more frequently, and work practices evaluated on a stepped-up basis, with extra safety meetings to try and correct bad work practices.

If any miner is observed working under the influence of alcohol or drugs, they will be removed from the job and severely reprimanded, and/or sent home for a three-day suspension with intent to discharge. Any miner who, due to the effects of prescribed medication, cannot perform the task assigned in a safe manner will be either temporarily reassigned to a less dangerous job, or granted an excused unpaid absence from work for that shift.

The mine foreman, who shall make safety observations, has the authority to take corrective actions on the spot, depending upon the magnitude of the safety infraction. If a severe violation has occurred, the mine foreman will make a detailed report and submit it to the mine operator, who shall from that point take all necessary corrective actions.

**Management acknowledges that conditions at a surface mine change on a regular basis due to many factors. These conditions shall be monitored by management and as conditions change, appropriate steps shall be taken through training and/or communications with the miners as to any current conditions and hazards.**

## **COMPONENT 5: EMERGENCY PROVISIONS AND PROCEDURES**

### **C-5: Equipment and Systems**

Emergency equipment, fire fighting, first aid, etc., will be provided by the operator following the requirements set forth by State and Federal regulations. Equipment will be checked and refurbished on a regularly scheduled basis, with special attention given to the maintenance and supply of first aid and fire fighting equipment. Each man working at the operation will be familiarized with the location and use of the equipment by a knowledgeable member of the supervisory staff.

The emergency transportation system for injured or ill persons will be provided by contract with an independent ambulance service on a 24-hour basis. Emergency medical facilities shall be made available at the closest hospital to the job site. These facilities are staffed with qualified and certified personnel to handle any type of medical emergency that might arise from a surface mine.

### **C-5: Emergency Policies and Provisions**

All miners will be trained in the maintenance, storage, location, and usage of all emergency equipment and systems. This training will primarily follow the guidelines set forth by MSHA, with emphasis placed upon the systems and equipment incorporated within the overall mining scheme at this operation.

Selected management personnel shall be given specific emergency training detailing procedures utilized in certain emergency situations. This type of training will enable the foreman to make a quicker and more intelligent decision when faced with an emergency. The operator shall formulate and inform each employee of the Mine Emergency Plan. This plan will be drawn from a mixture of ideas resulting from meetings between management and labor, as well as any consultants the operator may wish to invite for the formulation process.

### **C-5: Mine Emergency Plan**

#### **STEP 1 – Chain of command**

The chain of command to be followed in the event of an emergency shall be as follows:

1. Superintendent of operations
2. General mine foreman
3. Safety Director or Safety Coordinator

The superintendent shall have the direct responsibility for commanding and directing any emergency crisis operation. In the event of the superintendents' absence, this shall fall upon the general foreman, who shall direct the rescue operation in cooperation with personnel from safety and engineering departments.

#### **STEP 2 – Procedures in the event of fire**

In the event of a fire, its location, type and magnitude shall be the determining factors as to how and which procedures shall be followed.



Procedures for small contained fire:

- (1) If possible, extinguish fire.
- (2) Report fire to foreman immediately.
- (3) Prepare employees for evacuation if either fire or smoke pose a hazard to them.

Procedures for large fire or explosion:

- (1) Recover and treat any injured person(s).
- (2) Report fire and injuries to foreman immediately.
- (3) If feasible, secure emergency equipment from storage area.
- (4) Evacuate the danger area of all persons.

These procedures, at all times, are geared totally towards the safety and well being of the miners involved.

#### **C-5: Procedure in event of personal injury.**

When an accident occurs that results in the personal injury of one or more miners, the following procedures are to be utilized:

- (1) Make the accident area safe for the injured as well as the rescuer.
- (2) Administer first aid.
- (3) Notify foreman.
- (4) If necessary, foreman will direct that ambulance be called.
- (5) Injured person(s) transported to nearest medical facility.

Again, these procedures are geared totally towards the immediate well being of the miner.

#### **C-5: Emergency transportation of injured persons**

A copy of the contract for ambulance service shall be posted on the mine bulletin board. Also, a verbal explanation will be a part of the overall orientation that the miner shall receive before commencing work duties.

Proper methods of transporting injured personnel are a part of the first aid training that miners receive during the Annual Refresher Training given each year to all miners.

### **COMPONENT 6: ACCIDENT INVESTIGATION, ANALYSIS AND FOLLOW-UP**

#### **C-6: Investigation**

The mine Superintendent, Foreman, and a labor representative shall compose a team whose function shall be the investigation of any and all accidents. This investigation will begin within 24-hours

of the filing of an accident report and shall cover areas as deemed appropriate by those doing the investigation. (Example: who was injured, time of accident, specific location of accident, conditions of mine at time of accident, statement of witnesses, review of injured persons work record, etc.)

After this initial accident investigation, the team shall make a detailed documented report with recommendations to draw from an analysis to correct the situation that led to the accident in the first place.

#### **C-6: Analysis**

An analysis of the operations' past accident history was made to help formulate this program and any specialized training that might be offered to the employees. Further research, done on a regular basis, will encompass all types of accidents and near misses that area reported. These accident reports will also cover accidents of a non-injury nature. Persons having a near miss or a non-injury accident shall be required to report such to their immediate foreman who shall make a report of it in the daily report book.

The structure of the analytical research shall be of a manner that will identify deficiencies or strong points of the company's safety programs and training classes.

#### **C-6: Follow-Up**

Upon the ~~reportation~~ and analysis of the accident reports, the safety director or person in charge of health and safety at the mine shall review the findings and take the appropriate actions. This action could consist of a restructuring, additions, or deletions to the present safety program in force at this operation. Also, an example of other actions that result from this analysis could be in the form of an increase in safety meetings.

### **COMPONENT 7: PROGRAM PROMOTION AND ENFORCEMENT**

#### **C-7: Promotion**

Each miner will be encouraged, if not required to participate in safety training classes and meetings. When conditions warrant changes in the mines' safety program, the miners will be notified verbally and given new instructions. Along with the verbal instruction will be a written notice posted on the mine bulletin board. Any suggestions that mine arise from meetings with labor will be reviewed for possible implementation into the program. Safety incentives and recognition will be started to help involve employees into the program. (Example: stickers, hats, thermos, etc.)

#### **C-7: Enforcement**

Enforcement of the safety program provisions will be along the lines set forth in the company policy manual as concerning absenteeism.

**First violation:** A verbal warning with notation in work record.

**Second violation:** A written warning with notation in work record.

**Third violation:** Suspension of 3 days with intent to discharge.

Even though a slight infraction could cause a serious accident or fatality, the severity of the infraction will dictate the degree of punitive action to be taken against the miner. This program is to instill a sense of safety into the miner and will not be used as a means for discharge.

### **COMPONENT 8: EVALUATION PROCEDURES**

#### **C-8: Initial operation evaluation**

This being a new operation, no history exists; however, when available past history of accidents, violations from State and Federal agencies are taken into account in formulating this comprehensive safety program. If new, then management will formulate the program based upon leading information as to the nature and cause of accidents that are occurring in the mining industry today.

#### **C-8: Employee review of program**

The proposed safety program will be posted on the mine bulletin board for review at any time by all miners. Also, the operator will review the program during scheduled safety meetings to acquaint miners with the content of this program. Any miner shall receive a copy of such program that requests a copy.

#### **C-8: Annual review and evaluation**

The operator shall establish a MSDS "Right-to-Know" Center at the area where hazardous and toxic chemicals might be stored. Training for the proper handling and transportation of these chemicals and substances shall be covered and incorporated into the Annual Refresher Training class. When something new is obtained, training is to be conducted before the miner begins the task.

### **COMPONENT 9: CONTRACT LABOR**

**If you provide contract labor services for both surface and underground, the nature of your work may require you to submit a combination Comprehensive Mine Safety Program.**

#### **NOTE – ADDITIONAL COMPONENT(S) MAY BE REQUIRED**

*(For additional information pertaining to training and certifications, contact your Regional Safety Instructor)*

**Nature of work being performed while on mining property:**

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**Number of Employees (only report those going on mining property):** \_\_\_\_\_

<b>Employee Name</b>	<b>Certification Number</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Use additional paper if necessary).

**AS YOU HIRE ADDITIONAL EMPLOYEES, YOU WILL BE REQUIRED  
TO SUBMIT THE ABOVE INFORMATION BI-ANNUALLY.**

# PRE-INSPECTION OF SITE BY WVOMHS&T

# **PRE-INSPECTION OF SITE BY WVOMHS&T**



## State of West Virginia

**WV Office of Miners' Health, Safety & Training**  
#7 Players Club Drive, Suite 2 • Charleston, West Virginia • 25311  
Telephone 304-558-1425 • Fax 304-558-1282  
[minesafety.wv.gov](http://minesafety.wv.gov)

Date: \_\_\_\_\_

This is to certify that I have visited and made a personal inspection of the proposed location for a mine opening requested by:

Company: \_\_\_\_\_

Mine: \_\_\_\_\_

Permit Number: \_\_\_\_\_

I recommend that this request be honored and an approval be issued by the Office of Miners' Health, Safety and Training.

Highwall ☐ Augered ☐ Slope ☐ Shaft ☐ Drift ☐

Highwall Miner ☐ Other ☐

\_\_\_\_\_  
Mine Inspector and Number

\_\_\_\_\_  
Inspector-at-Large

One copy of this certification, signed by the Mine Inspector or the Inspector-at-Large, must be attached to the request for a mine opening approval.

# INITIAL MINE MAP CHECKLIST



# **CHECKLIST FOR INITIAL MINE MAP**

**THREE (3)**  
**CERTIFIED SURFACE MINE MAPS**  
**INCLUDING HAULROADS**

# **WEST VIRGINIA OFFICE OF MINERS' HEALTH, SAFETY & TRAINING**

## **Instructions: CHECKLIST FOR INITIAL MAP AND SEMI-ANNUAL MAP SUBMITTALS**

### **Instructions for Engineers:**

- 1) The attached checklist is to accompany all INITIAL MAPS and SEMI-ANNUAL MAPS submitted to this agency for review and archiving.
- 2) The checklist is intended as an aid to you and to the agency to ensure that in this age of layered computer drawings that all required map elements are present and accounted for. It is also intended to set some additional standards and clarify expectations of what the inspectors will be looking for in your maps.
- 3) The certifying engineer shall be responsible for the accuracy and completeness of this checklist, and shall acknowledge the same with his/her signature at the bottom.
- 4) Most of the checklist items are requirements whose wordings are taken verbatim from the regulations. A few, like item 28, are generally used in good practice but not universally so. Because of the various datums and coordinate systems in use today it is necessary to specify details concerning which system is used for your particular mine. It may be common knowledge to you, but perhaps not to the rest of the world now and forever.
- 5) Maps will not be accepted as complete until accompanied by a complete, signed, and dated checklist. If there are extenuating circumstances which render a particular item "not applicable" please provide justification on a separate sheet attached to the checklist.
- 6) One (1) current digital file on CD is required at the time of submission of the checklist and paper maps (preferably in .dwg format), unless the mine map was exclusively hand-drafted.
- 7) **NOTE: Effective January 1, 2014 the checklists for INITIAL MAPS, SEMI-ANNUAL MAPS, and FINAL MAPS have been revised.**

### **Instructions for Inspectors:**

- 1) **INITIAL** MAPS or SEMI-ANNUAL MAPS may not be accepted without a current digital file (CD) and a completed checklist signed and dated by the certifying engineer.
- 2) Only one copy of the CD is needed. Please forward all CD's of INITIAL MAPS and SEMI-ANNUAL MAPS to the Oak Hill Office, attention Chief Engineer. Paper maps or checklist copies of INITIAL MAPS and SEMI-ANNUAL MAPS do not need to be sent at this time.
- 3) In instances where a checklist item is deemed "not applicable" by the certifying engineer you may use your own discretion, consult with your Inspector at Large, or contact one of the engineers in Oak Hill.
- 4) Please verify each checklist item. When you are satisfied that the checklist is complete, please sign and date in the space provided at the bottom of the form and file the checklist with your map office copy.

# WEST VIRGINIA OFFICE OF MINERS' HEALTH, SAFETY & TRAINING

## CHECKLIST FOR INITIAL AND SEMI-ANNUAL MINE MAP APPROVAL

**22A-2-1.** The operator of every underground coal mine shall make, or cause to be made, an accurate map of such mine, on a scale of not less than one hundred, and not more than five hundred feet to the inch.

Company / Mine Name: \_\_\_\_\_

State ID: \_\_\_\_\_ MSHA ID: \_\_\_\_\_ Date: \_\_\_\_\_

Verify with your "check mark" that the following map elements are clearly shown on your map:

- ☐ (1) Name and address of the mine;
- ☐ (2) The scale and orientation (e.g. north arrow) of the map;
- ☐ (3) The property or boundary lines of the mine;
- ☐ (4) The shafts, slopes, drifts, tunnels, entries, rooms, crosscuts and all other excavations and auger and strip mined areas of the coalbed being mined;
- ☐ (5) All drill holes that penetrate the coalbed being mined;
- ☐ (6) Name of the coalbed;
- ☐ (7) Dip of the coalbed;
- ☐ (8) The outcrop of the coalbed within the bounds of the property assigned to the mine;
- ☐ (9) The elevations of tops and bottoms of shafts and slopes, and the floor at the entrance to drift and tunnel openings;
- ☐ (10) The elevation of the floor at intervals of not more than two hundred feet in;
  - (a) At least one entry of each working section, and main and cross entries;
  - (b) The last line of open crosscuts of each working section, and main and cross sections before such sections and main and cross entries are abandoned;
  - (c) Rooms advancing toward or adjacent to property or boundary lines or adjacent mines;

NOTE: The distance between surveyed elevations must not exceed 200 feet in (a), (b), or (c).  
Using digital submittal (CD) to supply this information is satisfactory if map scale is  $> 1''=200'$ .

- ☐ (11) Contour lines passing through whole number elevations of the coalbed being mined, the spacing of such lines not to exceed ten-foot contour intervals, except that a broader spacing of contour lines may be approved for steeply pitching coalbeds by the person authorized so to do under the federal act; and contour lines may be placed on overlays or tracings attached to mine maps;

- ☐ (12) As far as practicable the outline of existing and extracted pillars;

**NOTE:** Clearly show which sections of the mine were not mapped by physical survey, but were sketched in, and what information was used for their depiction.

- ☐ (13) Entries and air courses with the direction of air flow indicated by arrows;
- ☐ (14) The location of all surface mine ventilation fans, which location may be designated on the mine map by symbols;
- ☐ (15) Escapeways;
- ☐ (16) The known underground workings in the same coalbed on the adjoining properties within one thousand feet of such working and projections;
- ☐ (17) The location of any body of water dammed in the mine or held back in any portion of the mine, but such bodies of water may be shown on overlays or tracings attached to the mine maps used to show contour lines as provided under section 22A-2-1(10);
- ☐ (18) The elevation of any body of water dammed in the mine or held back in any portion of the mine;
- ☐ (19) The abandoned portion or portions of the mine that are permanently sealed from mine ventilation;
- ☐ (20) The location and description of at least two permanent base line points coordinated with the underground and surface mine traverses, and the location and description of at least two permanent elevation bench marks used in connection with establishing or referencing mine elevation surveys;
- ☐ (21) Mines above or below;
- ☐ (22) Water pools above;
- ☐ (23) The location of the principal streams and bodies of water on the surface

**NOTE:** Show any standing bodies of water, perennial, and intermittent streams.

- ☐ (24) Either producing or abandoned oil and gas wells located within five hundred feet of such mine and any underground area of such mine;
- ☐ (25) The location of all high pressure pipelines, high voltage power lines and principal roads;
- ☐ (26) The location of railroad tracks and public highways leading to the mine, and mine buildings of a permanent nature with identifying names shown;
- ☐ (27) Where the overburden is less than one hundred feet, occupied dwellings; and
- ☐ (28) Such other information as may be required under the federal act or by the Office of Miners' Health, Safety and Training, including the following:
  - ☐ a. Coordinate grid lines in at least one of the following formats:
    - ☐ 1. State Plan Coordinate System (SPCS) NAD 27
    - ☐ 2. State Plan Coordinate System (SPCS) NAD 83
    - ☐ 3. Local mine coordinate system clearly visible.

If a local coordinate system is used show LAT / LONG tick marks to at least the nearest second at each of the four (4) corners of each sheet of the mine map, with the spacing between tick marks not to exceed 34".

- ☐ b. Meridian information (NAD, Zone--see attached map for Zone designation)
- ☐ c. All map features and information required above shall be of sufficient line wt. and text size to be clearly legible for archiving by camera and by scanning.

**NOTE:** If thin line weights must be used, avoid pastel colors or colors like cyan or yellow.

- ☐ d. **General Location Map index** insert showing LAT/ LONG of mine portal(s), **County, and USGS quadrangle sheet name.**
- ☐ e. State ID# clearly shown on map.
- ☐ f. MSHA ID# clearly shown on map.
- ☐ g. "Opening", "6-month", or "Annual map" stated on map.
- ☐ h. Map certified by RPE or PS(U) licensed in West Virginia

- ☐ i. Date to which extent of mining is certified to be “current”
- ☐ j. Map shows date of latest depicted mining and all mining done to that date.
- ☐ k. Has there ever been a “FINAL MAP” submitted for this mine as a result of a prior company or operator closure and/or re-assignment.

No ☐

Yes ☐

Company Name \_\_\_\_\_

Date(s) \_\_\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

Has there been any production since previous “FINAL MAP”.

Yes ☐

No ☐

- ☐ l. Submittal information (both required):

☐ Hardcopy

☐ Computer disk

- ☐ m. Proposed final mine seals are properly shown as either “wet” or “dry”

- ☐ n. Map bar scale is included

- ☐ o. Map is at a scale of 1”=100’ or 1”= 200’, unless extent of workings make the map size impractical (more than 4 E-size sheets). NOTE: It is recognized that Chapter 22A-2-1 allows 1”=500’.

- ☐ p. Include a separate .DWG AutoCAD file detailing only the perimeter (footprint) of the mine, which should include all parts of the full mine.

☐ (29) Engineer sign off 1 \_\_\_\_\_ Date: \_\_\_\_\_

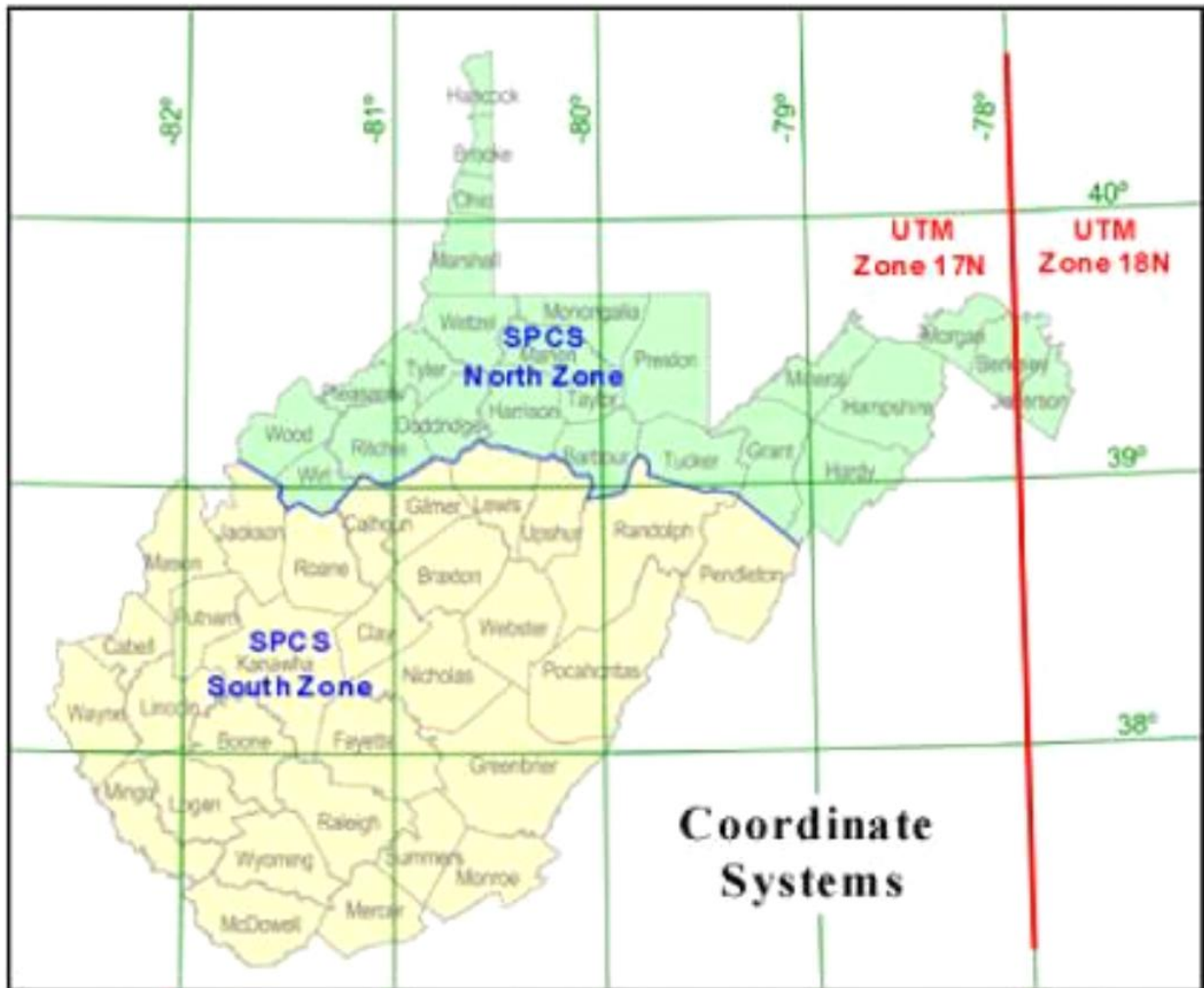
☐ (30) Inspector sign off 2 \_\_\_\_\_ Date: \_\_\_\_\_

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<sup>1</sup> This is so we know who completed the checklist. This is not a re-certification of the certified mine map being submitted.

<sup>2</sup> This is the inspector at the Regional Office who has compared the signed checklist and map for completeness.

1991. West Virginia Association of Land Surveyors.  
"West Virginia Land Surveyors Laws and Regulations."  
The Michie Company, Charlottesville, VA.



Location Map for SPCS and UTM “Zones”